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PTO/SB/05 (12/97)
Approved for use through 09/30/00. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	Metrika-003	Total Pages	
	First Named Inventor or Application Identifier			
	Joel M. Blatt and Wilma M. Mangan			
Express Mail Label No.		EM 427 196 899 US		

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Specification [Total Pages 32] <i>(preferred arrangement set forth below)</i> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 14] 4. Oath or Declaration [Total Pages 1] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 5 below]</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
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ACCOMPANYING APPLICATION PARTS	
8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee)	<input type="checkbox"/> Power of Attorney
10. <input type="checkbox"/> English Translation Document (if applicable)	
11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations
12. <input type="checkbox"/> Preliminary Amendment	
13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
14. <input type="checkbox"/> Small Entity Statement(s) filed in prior application	<input checked="" type="checkbox"/> Status still proper and desired
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
16. <input checked="" type="checkbox"/> Other: Patent Application Declaration and Power of Attorney	

17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information: Provisional application

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: **60 / 082,786**

18. CORRESPONDENCE ADDRESS					
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NAME	Timothy H. Gens		By: <i>Timothy H. Gens</i>		
	Trial & Technology Law Group		Reg. No.: 29,153		
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CITY	Menlo Park	STATE	CA	ZIP CODE	94025
COUNTRY	U.S.A.	TELEPHONE	(650) 324-2269	FAX	(650) 324-0178

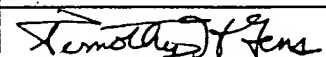
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<h2 style="text-align: center;">FEE TRANSMITTAL</h2> <p style="text-align: center;"><i>Note: Effective October 1, 1997. Patent fees are subject to annual revision.</i></p>	Complete if Known	
	Application Number	
	Filing Date	4/25/99
	First Named Inventor	Joel Blatt
	Group Art Unit	
	Examiner Name	
TOTAL AMOUNT OF PAYMENT (\$)		Attorney Docket Number Met-003

<h3 style="text-align: center;">METHOD OF PAYMENT (check one)</h3> <p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number _____</p> <p>Deposit Account Name _____</p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <h3 style="text-align: center;">FEE CALCULATION</h3> <h4>1. FILING FEE</h4> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>101 790</td> <td>201 395</td> <td>Utility filing fee</td> <td>380.00</td> </tr> <tr> <td>106 330</td> <td>206 165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>107 540</td> <td>207 270</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>108 790</td> <td>208 395</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>114 150</td> <td>214 75</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="3">SUBTOTAL (1)</td> <td>(\$) 380.00</td> </tr> </tbody> </table> <h4>2. CLAIMS</h4> <table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1 - 20 = 0</td> <td>X</td> <td></td> <td></td> </tr> <tr> <td>1 - 3 = 0</td> <td>X</td> <td></td> <td></td> </tr> <tr> <td>Multiple Dependent Claims</td> <td>X</td> <td></td> <td></td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>103 22</td> <td>203 11</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>102 82</td> <td>202 41</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>104 270</td> <td>204 135</td> <td>Multiple dependent claim</td> <td></td> </tr> <tr> <td>109 82</td> <td>209 41</td> <td>Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>110 22</td> <td>210 11</td> <td>Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="3">SUBTOTAL (2)</td> <td>(\$) 0</td> </tr> </tbody> </table>	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	101 790	201 395	Utility filing fee	380.00	106 330	206 165	Design filing fee		107 540	207 270	Plant filing fee		108 790	208 395	Reissue filing fee		114 150	214 75	Provisional filing fee		SUBTOTAL (1)			(\$) 380.00	Total Claims	Extra	Fee from below	Fee Paid	1 - 20 = 0	X			1 - 3 = 0	X			Multiple Dependent Claims	X			Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	103 22	203 11	Claims in excess of 20		102 82	202 41	Independent claims in excess of 3		104 270	204 135	Multiple dependent claim		109 82	209 41	Reissue independent claims over original patent		110 22	210 11	Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)			(\$) 0	<h3 style="text-align: center;">FEE CALCULATION (continued)</h3> <h4>3. 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SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name	Timothy H. Gens			Reg. Number	29,153
Signature				Deposit Account User ID	
	Date	3/ /98			

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